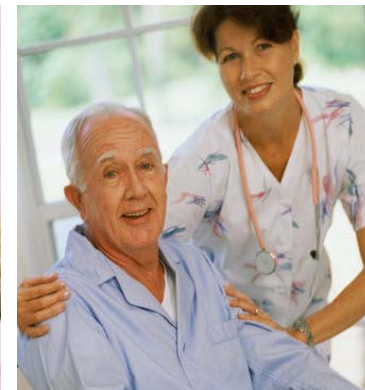


Choices for Independence: Strategies for Modernizing Long-Term Care

South Carolina Leadership Summit: A Call To Action

April 27th, 2007

*John Wren
Deputy Assistant Secretary*



U.S. Administration on Aging
Department of Health and Human Services



CHOICES for Independence

Three Pronged Strategy

- Consumer Empowerment
- More Choices for High Risk Individuals
- Healthy Lifestyles



Choices for Independence





Consumer Empowerment



- Launched in 2003
- Joint initiative of AoA and Centers for Medicare and Medicaid Services
- **Vision:**
 - To create a single, coordinated system of information and access for all persons seeking long term support to minimize confusion, enhance individual choice, and support informed decision-making



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Consumer Empowerment



- Aging and disability networks have been providing Information and Assistance, benefits counseling, and assessment and eligibility determination services through a variety of programs for many years
- The Aging and Disability Resource Center Initiative is designed to assist states in bringing together these programs and services into Single Point of Entry programs that provide seamless access to information and services for people with disabilities of all ages and incomes



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Awareness & Information

- Public Education
- Information on Options

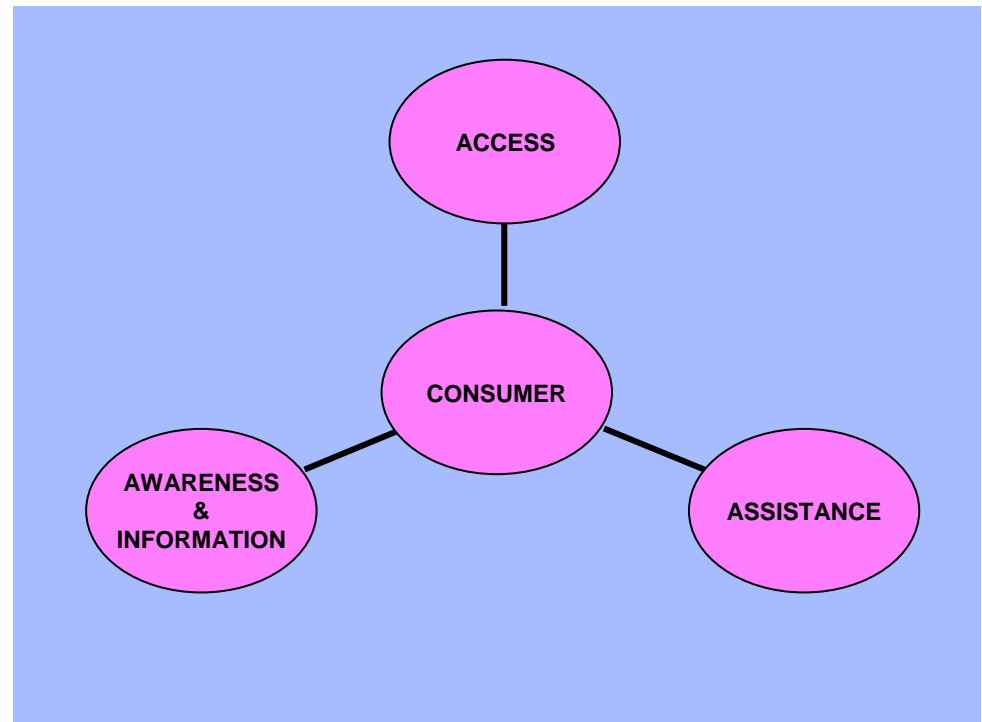
Assistance

- Options Counseling
- Benefits Counseling
- Employment Options Counseling
- Referral
- Crisis Intervention
- Planning for Future Needs

Access

- Eligibility Screening
- Private Pay Services
- Comprehensive Assessment
- Programmatic Eligibility Determination
- Medicaid Financial Eligibility Determination
- One-Stop Access to all public programs


Aging and Disability Resource Centers



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Consumer Empowerment - www.longtermcare.gov

 U.S. Department of Health and Human Services

[Site Map](#)

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National Clearinghouse for Long-Term Care Information

Own Your Future

Awareness Campaign




Own Your Future Planning Kit


Place Order

What's New


HHS PARTNERS WITH STATES ON LONG-TERM CARE EDUCATION

**Understanding Long-Term Care**

- Definitions & Risks
- Services & Providers
- Costs & Paying

**Planning for Long-Term Care**


- Importance of Planning
- Planning Steps
- Planning Info & Resources

**Paying for Long-Term Care**

- Cost of Care
- Public Programs
- Private Financing

Welcome to the National Clearinghouse for Long-Term Care Information. This is a new web site developed by the U.S. Department of Health and Human Services to provide information and resources to help you and your family plan for future long-term care (LTC) needs.

While no one likes to think about a time when they might need long term care





Offering More Choice for High-Risk Individuals

➤ Community Living Incentive

A nursing home diversion strategy that builds on the Aging Network's existing work to develop comprehensive systems of community-based supports to help people live at home for as long as possible and avoid unnecessary placement in nursing homes



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Offering More Choice for High-Risk Individuals

Effective Nursing Home Diversion

- **Service Elements:**
 - **Flexible Services, supports and financing**
 - **Targets individuals at high risk of nursing home placement**
 - **Targets individuals at high risk of Medicaid Spend down**
 - **Complements the efforts of family caregivers and other community supports**



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Offering More Choice for High-Risk Individuals

Effective Nursing Home Diversion

- **Systems Elements:**
 - **ADRC/Single entry point system**
 - **Quality management and assurance**
 - **Mechanisms to support consumer directed service options**
 - **Performance measurement**



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Offering More Choice for High-Risk Individuals

FY 2007

AoA plans to provide states with the opportunity to apply for funding to put Service and Systems elements in place to provide nursing home diversion programs through existing funding streams

FY 2008

Funding in the President's Budget to demonstrate the Community Living Incentive in select states utilizing Older Americans Act funding



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Healthy Lifestyles

Evidence-based Disease and Disability Prevention:

- Chronic Disease Self-Management
- Falls Prevention
- Nutrition
- Physical Activity
- Others



Delivered Through Aging Network Services Providers

Health Promotion and Disease Prevention

- The Aging Network has been providing health promotion and disease prevention programming for decades in such areas as nutrition and physical activity/exercise using Older Americans Act Title III D and other funding sources



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Health Promotion and Disease Prevention

- **Today...**
 - Funders are increasingly demanding that programming be based on solid evidence
 - Agency leaders want to concentrate limited resources on proven programs
 - Older adults themselves are looking for programs that have been proven to work



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Evidence-Based Disease and Disability Prevention

- **AoA Evidence-Based Disease Prevention Program**
 - Modeled after John A. Hartford Foundation Program (4 grants - 3 years) – NCOA Resource Center
 - In 2003 AoA funded 12 demonstration grants to communities
 - Grant to NCOA for TA Resource Center
 - In 2006 AoA funded 16 states



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Evidence-Based Disease and Disability Prevention

- **2006 – 16 grants awarded to states**

Grants will be used to demonstrate how states can develop the systems to build, implement, and sustain high quality EBDP programs throughout the aging services network.

8 additional states to be funded in FY 2007



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Evidence-Based Disease and Disability Prevention

■ AoA Criteria for Selecting Interventions

- The intervention must be based upon a **randomized controlled trial** with results published in a **peer-reviewed journal**.
- The intervention must have been developed and tested on **older adults** or a rationale presented as to why it would be effective on older adults.
- The intervention must be **replicable** in a community-based setting.
- Continuing Research and **Improvements**.



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Evidence-Based Disease and Disability Prevention

- **AoA Evidence-Based Disease Prevention Program**
 - **Chronic Disease Self-Management Program**
 - www.Patienteducation.stanford.edu/programs/cdsmp.html
 - **Physical Activity**
 - www.projectenhance.org/pro/fitness.html
 - **Fall Prevention**
 - www.bu.edu/hdv/products/balance/index.html



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Evidence-Based Disease and Disability Prevention

- **AoA Evidence-Based Disease Prevention Program**
 - **Nutrition and Diet**
 - <http://www.healthyagingprograms.com/content.asp?sectionid=72&ElementID=366>
 - **Depression and Substance Abuse**
 - **Healthy Ideas –**
www.shelteringarms.org/index.cfm/CFID/28004092/CFTOKEN/96693372/MenuItemID/278.htm



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Evidence-Based Disease and Disability Prevention

■ Core components

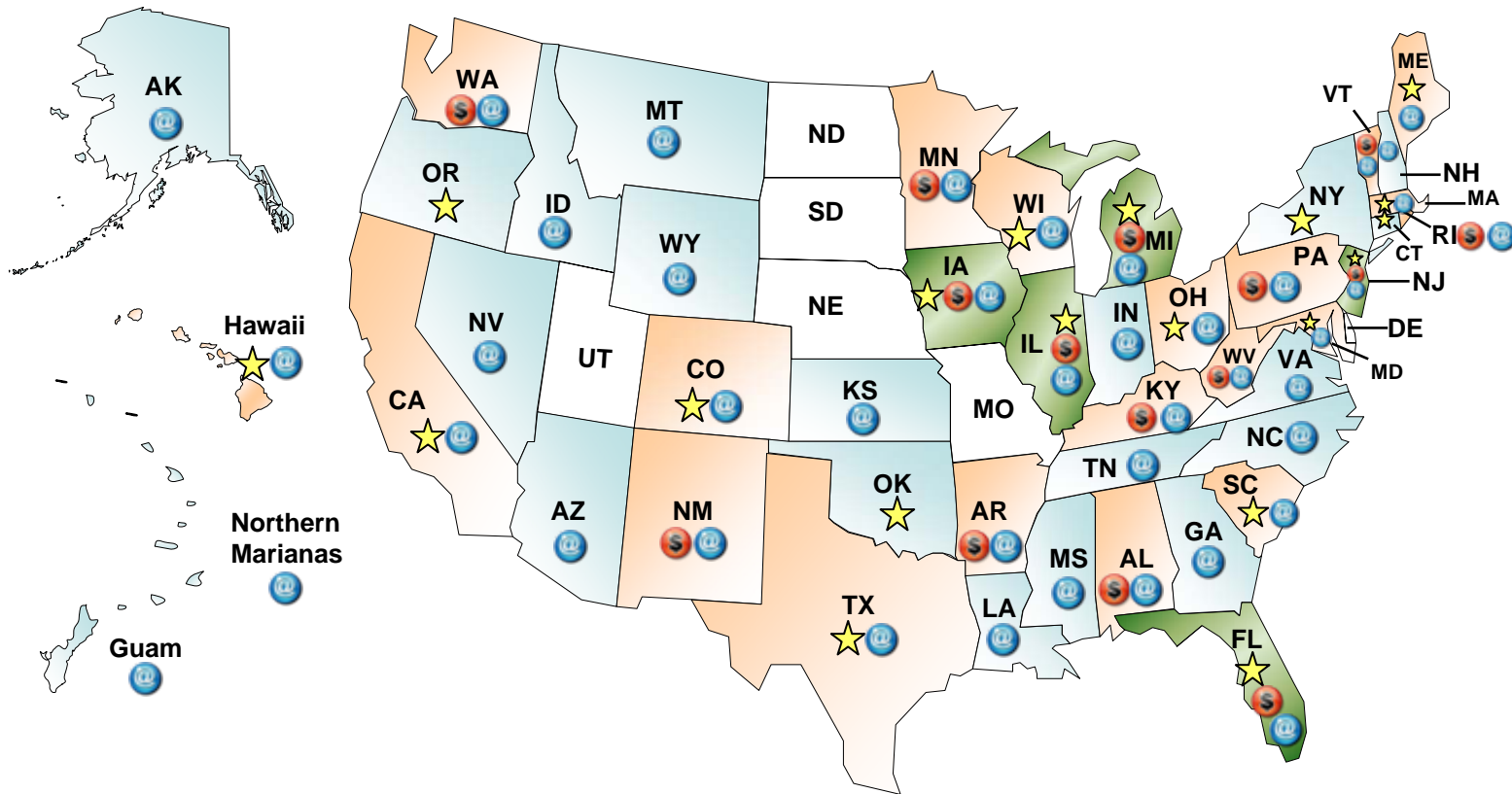
- States expected to implement programs in at least three geographic areas.
- States must implement the Stanford University Chronic Disease Self-Management Program (CDSMP) in at least one geographic area.
- States must develop the infrastructure and partnerships to embed EBDP programs for older adults within their systems of health and long-term care.



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INVESTMENTS

@ Aging & Disability Resource Center Initiatives

\$ Cash & Counseling Demonstration Programs

★ Evidence Based Disease Prevention Projects

State Involvement in all 3 Program Components; 2 Program Components; 1 Program Component